

## STATE OF IOWA

TERRY E. BRANSTAD, GOVERNOR KIM REYNOLDS, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES M. PALMER, DIRECTOR
THOMAS C. BOUSKA, SERVICE AREA MANAGER

November 22, 2013

Laura Rhodes 3025 7<sup>th</sup> Ave. Council Bluffs, IA 51501

Dear Child Care Provider,

☐110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits.
☐110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.
☐110.5(1)k Fire and tornado drills are practiced monthly and documentation kept.
☐110.5(1)m Has not less than one 2A 10BC rated fire extinguisher in a visible and readily accessible place on each child-occupied floor.
☐110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway.
☐110.5(1)n Each smoke detector is tested monthly, and a record is kept for inspection purposes.
☐110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and <a href="https://www.iowasmokefreeair.gov">www.iowasmokefreeair.gov</a> .
☐110.5(1)u The provider has written policies about caring for mildly ill children and the exclusion of children due to illness, and informs parents of policies.

Example: For the protection of all of the children in my care as well as the health of your own child and my family, this is my sick policy. In order to protect the group as a whole, I ask that parents

assist me by keeping sick children at home.

In the event that a child becomes sick the family will be notified and prompt pick up arrangements will be made.

If a child is sick, unable to play outdoors, and/or unable to participate in regular daily activities, alternate arrangements for care must be made.

Children with infectious illnesses cannot attend.

When child may not attend daycare

Fever 99.9 degrees and higher

this includes the night before/morning of daycare  $\sim$  No fever for 24 hours without taking fever reducing medication. If you had to give your child medicine the night before then that still means they cannot come to daycare the next morning.

Rash ~ unexplained rash ~ Consult doctor/Need a note stating your child is not contagious.

Vomiting or/and Diarrhea ~ All symptoms must be gone and no Vomiting or Diarrhea for 24 hours

Strep Throat ~ Consult doctor/Need a note. Child must be on antibiotics for 24 hours and be without a fever without medication for it.

Flu/Bronchitis/Pneumonia ~ Consult doctor/Need a note stating it is ok to come back to daycare. This usually takes about 2-3 days before they can come back to daycare. The child must be on antibiotics and no fever for at least 24 hours without taking fever reducing medication.

Ear Infection ~ Consult doctor/Need a note. Child must be on antibiotics and no fever for 24 hours before returning.

Conjunctivitis (red eyes with yellow discharge)/Pink Eye  $\sim$  consult doctor/Need a note. Child must be on eye drops/antibiotics for 24 hours.

Head Lice ~ Usually takes 24 hours to treat head and house ~ When all nits have been removed and child is cleared from the doctor. Need a note.

Common Cold Policy

Children suffering from a common cold will be assessed on an individual basis.

Factors of consideration include the developmental level of your child in congruence with my ability to limit the spread of germs.

The younger your child, the more difficult it is to keep the spread of germs down. For example: hand to face contact, mouthing of toys, uncontrolled nasal discharge, uncovered sneezing and coughing etc.

(Also when caring for an ill child, the ability to provide high quality care to all of the other children is jeopardized)

A child may return when he or she is free from symptoms and no longer infectious. The child should also be well enough to actively participate throughout the day. In any case of serious or unexplainable illness, a doctor's medical clearance may be required prior to admission back into care.

If you have any questions concerning this policy and whether your child should attend, please call me before bringing your child.

PLEASE BE COURTEOUS OF ALL CHILDREN IN MY PROGRAM, AND REFRAIN FROM BRINGING AN ILL CHILD UNTIL 24 HOURS HAVE PASSED SINCE ANY FEVER, VOMITING, DIARRHEA, OR ANY OTHER COMMUNICABLE SYMPTOMS HAVE OCCURRED.

110.5(1)v The provider has written policies about responding to health-related emergencies.

You should have a written policy outlining the procedures and actions you will take in the event of a health-related emergency. The policy should address the following:

- ♦ First aid measures
- ◆ Contacting emergency medical services
- ◆ Transporting of an ill or injured child
- Contacting parents
- ◆ Care for the other children in your care during the emergency

COMMENTS: Assistance with developing policies is available from your child care health consultant at your child care resource and referral agency.

110.5(2) A provider file is maintained and contains:	
☐110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated ever two years.	
110.5(8) Children's Files	
110.5(8) An individual file is maintained for each child and updated annually or when there are changes.	ł

An example for policy handbook: Department of Iowa Policy states that before the first day of care the parent must complete an intake form and signed medical consent for each child attending. Within 30 days the parent must provide a physical signed by a physician and an updated immunization. Regardless of when children started attending (daycare name), every year by August 1 the parents must provide an updated physical and immunization to provider. Children who do not return the requested paperwork by due dates will not be able to attend

(daycare name) until paperwork is returned. Failure to complete paperwork could result in losing a slot at (daycare name).

Each file contains:
☐110.5(8)c A signed medical consent from the parent authorizing emergency treatment.
☐110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.
☐110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.
☐110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually.
☐110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.
$\square$ 110.5(8)g A signed and dated immunization certificate provided by the state department of public health.
☐110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.
☐110.5(8)j Injury report forms to document injuries requiring first aid or medical care.
110.8(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "A" The provider was not over numbers at the time of the visit. This is included as a reminder to provider regarding how many children she can care for.
☐110.8(1)a Not more than six preschool children present at any one time including infants
☐110.8(1)a Of these six children, not more than four children who are 24 months of age or younger are present at any one time.
☐110.8(1)a Of the four children under 24 months of age, no more than three may be 18 months of age or younger.
☐110.8(1)a Not more than two additional school-age children for less than two hours at any one time.
110.8(1)a Not more than eight children present when the emergency school closing exception is in effect

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.

⊠Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur after the 45 day time period has elapsed.

Please do not hesitate to contact me at DHS at (712) 328 - 5713 if you have any questions regarding this letter.

Sincerely,

Michelle Noddings Social Worker II mnoddin@dhs.state.ia.us 417 E. Kanesville Blvd. Council Bluffs, IA 51503 (712) 328 - 5713

## Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-800-945-9778.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child\_Care/Professional\_Development.html and you can sign up for training at https://ccmis.dhs.state.ia.us/trainingregistry/

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).